

ENTRY FORM for Peterborough Liftlock Atom Hockey Tournament

Team Name (in full) _____

Sweater Colors Body _____ Trim _____ **REP TEAMS MUST HAVE 2 SETS OF SWEATERS AVAILABLE**

Division (Circle) **AA Major AA Minor A Major A Minor BB B CC C DD D TIER/SELECT HL (HOUSE LEAGUE)**

Hockey League
(Association)

City / Town _____

Association Web Site _____ Team Website _____

Jurisdiction: (Circle) OMHA NOHA GTHL ODHL ODMHA ALLIANCE Other _____ Travel Permit inc'd _____ (add \$10.00 to Entry Fee)
(required for non-OMHA teams)

Coach: _____ Manager: _____

Address: _____ Address: _____

OFFICE USE ONLY

City / Town: _____ City / Town: _____

Province / State: _____ Province / State: _____

Phone Home () _____ Phone Home () _____

TEAM # DIVISION

Work () _____ Work () _____

Fax () _____ Fax () _____

OUT OF TOWN TEAMS – OUR TEAM HAS BOOKED ACCOMDATIONS AT:

E-mail _____ E-mail _____

Permission of the _____ Minor Hockey Association has been granted to the team listed above to participate in the Peterborough Liftlock Atom Hockey Tournament. Signature of Association President or Secretary required _____

SIGNATURE

Signing this Entry Form, the team representative, on behalf of his/her team releases the sponsors, officials, arena management and all concerned with this tournament from any liability for any accident or injury which may be incurred by any player, team official or spectator while participating in, coming to or leaving from the tournament. WITHDRAWAL FROM TOURNAMENT: Any team accepted by the Tournament Committee; withdrawing after December 1, 2010 will forfeit their entry fee. Team representative signing below will act as contact for this team's application.

Signature Title E-mail Address Date Entry Fee Enclosed

CONTACT NUMBERS

Home () _____ Work () _____ CELL () _____ FAX () _____

Please Check () YES; I HAVE CAREFULLY READ THE TOURNAMENT "RULES" SECTION AT www.liftlockatomhockey.com

